

1
2
3
4
5
6 **BEFORE THE**
7 **BOARD OF REGISTERED NURSING**
8 **DEPARTMENT OF CONSUMER AFFAIRS**
9 **STATE OF CALIFORNIA**

10 In the Matter of the Accusation Against:

Case No. 2012-376

11 **CAROL ANN FARNSTROM,**
12 **AKA CAROL ANN FRANSTRON,**
13 **AKA CAROL ANN FARSTROM,**
14 **AKA CAROL ANN PAGEAU**
15 **3730 Southview Drive #417**
16 **San Diego, CA 92117**

DEFAULT DECISION AND ORDER

[Gov. Code, §11520]

17 **Registered Nurse License No. 613677**

18 Respondent.

19 **FINDINGS OF FACT**

20 1. On or about December 15, 2011, Complainant Louise R. Bailey, M.Ed., RN, in her
21 official capacity as the Executive Officer of the Board of Registered Nursing (Board), filed
22 Accusation No. 2012-376 against Carol Ann Farnstrom, aka Carol Ann Franstron, aka Carol Ann
23 Farstrom, aka Carol Ann Pageau (Respondent) before the Board of Registered Nursing,
24 Department of Consumer Affairs. (Accusation attached as Exhibit A.)

25 2. On or about February 13, 2003, the Board issued Registered Nurse License No.
26 613677 to Respondent. The Registered Nurse License was in full force and effect at all times
27 relevant to the charges brought in Accusation No. 2012-376 and will expire on April 30, 2012,
28 unless renewed.

3. On or about December 15, 2011, Respondent was served by Certified and First Class
Mail copies of the Accusation No. 2012-376, Statement to Respondent, Notice of Defense,
Request for Discovery, and Discovery Statutes (Government Code sections 11507.5, 11507.6,

1 and 11507.7) at Respondent's address of record which, pursuant to California Code of
2 Regulations, title 16, section 1409.1, is required to be reported and maintained with the Board,
3 which was and is: 3730 Southview Drive #417, San Diego, CA 92117.

4 4. Service of the Accusation was effective as a matter of law under the provisions of
5 Government Code section 11505, subdivision (c) and/or Business & Professions Code section
6 124.

7 5. On or about January 17, 2012, the aforementioned documents served by First Class
8 mail were returned by the U.S. Postal Service marked "Undeliverable as Addressed." On or
9 about January 26, 2012, the aforementioned documents served by Certified Mail were also
10 returned by the U.S. Postal Service marked "Undeliverable as Addressed." The address on the
11 documents was the same as the address on file with the Board. Respondent failed to maintain an
12 updated address with the Board and the Board has made attempts to serve the Respondent at the
13 address on file. Respondent has not made herself available for service and therefore, has not
14 availed herself of her right to file a notice of defense and appear at hearing.

15 6. Government Code section 11506 states, in pertinent part:

16 (c) The respondent shall be entitled to a hearing on the merits if the respondent
17 files a notice of defense, and the notice shall be deemed a specific denial of all parts
18 of the accusation not expressly admitted. Failure to file a notice of defense shall
19 constitute a waiver of respondent's right to a hearing, but the agency in its discretion
20 may nevertheless grant a hearing.

21 7. Respondent failed to file a Notice of Defense within 15 days after service upon her of
22 the Accusation, and therefore waived her right to a hearing on the merits of Accusation No. 2012-
23 376.

24 8. California Government Code section 11520 states, in pertinent part:

25 (a) If the respondent either fails to file a notice of defense or to appear at the
26 hearing, the agency may take action based upon the respondent's express admissions
27 or upon other evidence and affidavits may be used as evidence without any notice to
28 respondent.

9. Pursuant to its authority under Government Code section 11520, the Board finds
Respondent is in default. The Board will take action without further hearing and, based on the
relevant evidence contained in the Default Decision Evidence Packet in this matter, as well as

1 taking official notice of all the investigatory reports, exhibits and statements contained therein on
2 file at the Board's offices regarding the allegations contained in Accusation No. 2012-376, finds
3 that the charges and allegations in Accusation No. 2012-376, are separately and severally, found
4 to be true and correct by clear and convincing evidence.

5 10. Taking official notice of its own internal records, pursuant to Business and
6 Professions Code section 125.3, it is hereby determined that the reasonable costs for Investigation
7 and Enforcement is \$10,516.00 as of February 3, 2012.

8 DETERMINATION OF ISSUES

9 1. Based on the foregoing findings of fact, Respondent Carol Ann Farnstrom, aka Carol
10 Ann Franstron, aka Carol Ann Farstrom, aka Carol Ann Pageau has subjected her Registered
11 Nurse License No. 613677 to discipline.

12 2. The agency has jurisdiction to adjudicate this case by default.

13 3. The Board is authorized to revoke Respondent's Registered Nurse License based upon
14 the following violations alleged in the Accusation which are supported by the evidence contained
15 in the Default Decision Evidence Packet in this case:

16 a. Respondent is subject to disciplinary action under section 2761(a), on the grounds of
17 unprofessional conduct, as defined in Code section 2762(e), in that between about January 25,
18 2010 and May 14, 2010, while on duty as a registered nurse at Kaiser Hospital, San Diego,
19 California, Respondent falsified, or made grossly incorrect, grossly inconsistent, or unintelligible
20 entries in hospital, patient, or other records pertaining to the controlled substance Dilaudid; and

21 b. Respondent is subject to disciplinary action pursuant to Code section 2761(a), on the
22 grounds of unprofessional conduct, as defined by Code section 2762(a), and in violation of Health
23 and Safety Code sections 11170 and 11173, subdivision (a), in that between about January 25,
24 2010 and May 14, 2010, while on duty as a registered nurse at Kaiser Hospital, Respondent
25 obtained, possessed, and/or administered to herself the controlled substance Dilaudid.

26 ///

27 ///

28 ///

ORDER

IT IS SO ORDERED that Registered Nurse License No. 613677 issued to Respondent Carol Ann Farnstrom, aka Carol Ann Franstron, aka Carol Ann Farstrom, aka Carol Ann Pageau, is revoked.

Pursuant to Government Code section 11520, subdivision (c), Respondent may serve a written motion requesting that the Decision be vacated and stating the grounds relied on within seven (7) days after service of the Decision on Respondent. The agency in its discretion may vacate the Decision and grant a hearing on a showing of good cause, as defined in the statute.

This Decision shall become effective on August 6, 2012

It is so ORDERED JULY 6, 2012


BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS

80596601.DOC
DOJ Matter ID:SD2011801293

Attachment:
Exhibit A: Accusation

Exhibit A

Accusation

1 KAMALA D. HARRIS
Attorney General of California
2 LINDA K. SCHNEIDER
Supervising Deputy Attorney General
3 ANTOINETTE B. CINCOTTA
Deputy Attorney General
4 State Bar No. 120482
110 West "A" Street, Suite 1100
5 San Diego, CA 92101
P.O. Box 85266
6 San Diego, CA 92186-5266
Telephone: (619) 645-2095
7 Facsimile: (619) 645-2061
Attorneys for Complainant

8
9 **BEFORE THE**
BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS
10 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

Case No. 2012- 376

12 **CAROL ANN FARNSTROM, AKA**
13 **CAROL ANN FRANSTRON, AKA**
14 **CAROL ANN FARSTROM, AKA**
CAROL ANN PAGEAU
15 **3730 Southview Drive #417**
San Diego, CA 92117

A C C U S A T I O N

16 **Registered Nurse License No. 613677**

17 Respondent.

18
19 Complainant alleges:

20 **PARTIES**

21 1. Louise R. Bailey, M.Ed., RN (Complainant) brings this Accusation solely in her
22 official capacity as the Executive Officer of the Board of Registered Nursing (Board),
23 Department of Consumer Affairs.

24 2. On or about February 13, 2003, the Board of Registered Nursing issued Registered
25 Nurse License Number 613677 to Carol Ann Farnstrom, aka Carol Ann Franstron, aka Carol Ann
26 Farstrom, aka Carol Ann Pageau (Respondent). The Registered Nurse License was in full force
27 and effect at all times relevant to the charges brought herein and will expire on April 30, 2012,
28 unless renewed.

JURISDICTION

3. This Accusation is brought before the Board under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2750 of the Code provides, in pertinent part, that the Board may discipline any licensee, including a licensee holding a temporary or an inactive license, for any reason provided in Article 3 (commencing with section 2750) of the Nursing Practice Act.

5. Section 2764 of the Code provides, in pertinent part, that the expiration of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary proceeding against the licensee or to render a decision imposing discipline on the license.

6. Section 2811(b) of the Code states:

“Each such license not renewed in accordance with this section shall expire but may within a period of eight years thereafter be reinstated upon payment of the biennial renewal fee and penalty fee required by this chapter and upon submission of such proof of the applicant's qualifications as may be required by the board, except that during such eight-year period no examination shall be required as a condition for the reinstatement of any such expired license which has lapsed solely by reason of nonpayment of the renewal fee. After the expiration of such eight-year period the board may require as a condition of reinstatement that the applicant pass such examination as it deems necessary to determine his present fitness to resume the practice of professional nursing.”

STATUTORY PROVISIONS

7. Section 2761 of the Code states:

“The board may take disciplinary action against a certified or licensed nurse or deny an application for a certificate or license for any of the following:

“(a) Unprofessional conduct, which includes, but is not limited to, the following:

“....

///

///

1 “(d) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the
2 violating of, or conspiring to violate any provision or term of this chapter or regulations adopted
3 pursuant to it.”

4 8. Section 2762 of the Code states:

5 “In addition to other acts constituting unprofessional conduct within the meaning of this
6 chapter [the Nursing Practice Act], it is unprofessional conduct for a person licensed under this
7 chapter to do any of the following:

8 “(a) Obtain or possess in violation of law, or prescribe, or except as directed by a licensed
9 physician and surgeon, dentist, or podiatrist administer to himself or herself, or furnish or
10 administer to another, any controlled substance as defined in Division 10 (commencing with
11 Section 11000) of the Health and Safety Code or any dangerous drug or dangerous device as
12 defined in Section 4022.

13 “... ”

14 “(e) Falsify, or make grossly incorrect, grossly inconsistent, or unintelligible entries in any
15 hospital, patient, or other record pertaining to the substances described in subdivision (a) of this
16 section.”

17 9. Code section 4060 states:

18 “No person shall possess any controlled substance, except that furnished to a person upon
19 the prescription of a physician, dentist, podiatrist, optometrist, veterinarian, or naturopathic doctor
20 pursuant to Section 3640.7, or furnished pursuant to a drug order issued by a certified nurse-
21 midwife pursuant to Section 2746.51, a nurse practitioner pursuant to Section 2836.1, a physician
22 assistant pursuant to Section 3502.1, a naturopathic doctor pursuant to Section 3640.5, or a
23 pharmacist pursuant to either subparagraph (D) of paragraph (4) of, or clause (iv) of subparagraph
24 (A) of paragraph (5) of, subdivision (a) of Section 4052. This section shall not apply to the
25 possession of any controlled substance by a manufacturer, wholesaler, pharmacy, pharmacist,
26 physician, podiatrist, dentist, optometrist, veterinarian, naturopathic doctor, certified nurse-
27 midwife, nurse practitioner, or physician assistant, when in stock in containers correctly labeled
28 with the name and address of the supplier or producer. Nothing in this section authorizes a

1 certified nurse-midwife, a nurse practitioner, a physician assistant, or a naturopathic doctor, to
2 order his or her own stock of dangerous drugs and devices.”

3 10. Health and Safety Code section 11170 states that no person shall prescribe,
4 administer, or furnish a controlled substance for herself.

5 11. Health and Safety Code section 11173, subdivision (a) states:

6 “No person shall obtain or attempt to obtain controlled substances, or procure or attempt to
7 procure the administration of or prescription for controlled substances (1) by fraud, deceit,
8 misrepresentation, or subterfuge; or (2) by the concealment of a material fact.”

9 COST RECOVERY

10 12. Section 125.3 of the Code provides, in pertinent part, that the Board may request the
11 administrative law judge to direct a licensee found to have committed a violation or violations of
12 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and
13 enforcement of the case.

14 DRUGS

15 13. Dilaudid is a Schedule II controlled substance as designated by Health and Safety
16 Code section 11507(b)(1)(k), and is a dangerous drug pursuant to Business and Professions Code
17 section 4022. Dilaudid is a brand name for the generic drug hydromorphone and is used to treat
18 pain.

19 FACTUAL ALLEGATIONS

20 14. Respondent was employed as a registered nurse by Kaiser Permanente Medical
21 Center located in San Diego, California (Kaiser). Respondent worked on the surgical prep team.
22 Many of the patients the surgical prep team handled at that time had elective, out-patient surgical
23 procedures.

24 15. In May 2010, Respondent’s Nurse Manager at Kaiser received complaints from
25 Kaiser physicians and other Kaiser registered nurses concerning the amount of narcotic
26 medication Respondent administered in the pre-operative area, and the amount of medication
27 Respondent reported as “wasted”, when her co-workers had just seen her come out of the
28 bathroom. The other registered nurses also reported that they were reluctant to witness

Respondent's waste of narcotic medications as required because they did not actually witness the removal or administration of the medication.

16. On May 14, 2010, Respondent's Nurse Manager at Kaiser requested a Proactive Diversion Report for Respondent from the Kaiser Pharmacy for the time period March 1, 2010 to May 14, 2010 concerning Respondent's use of Dilaudid. That Report demonstrated that Respondent removed five times more Dilaudid than any other Kaiser nurse in the same department on any given day. Respondent was placed on administrative leave on May 14, 2010. Respondent handed in her resignation from Kaiser on May 17, 2010, before Respondent's Nurse Manager could meet with her to discuss the allegations of misconduct.

17. An internal investigation at Kaiser revealed that between January 19, 2010 and May 7, 2010, Respondent made inaccurate entries in hospital and patient medical records and took patients' medications as follows:

a. Patient 1: On January 25, 2010, the physician ordered 0.5 mg Dilaudid every 4 hours as needed for pain control for this patient from 14:04 to 20:41. On January 25, 2010, at 14:15 hours, Respondent withdrew from the Pyxis¹ 2 mg of Hydromorphone (Dilaudid) for this patient. At 14:56, Respondent withdrew another 2 mg Dilaudid for this patient. Respondent charted in the Medication Administration Record (MAR) that she administered 0.5 mg Dilaudid to the patient at 14:15, and that she administered 0.5 mg Dilaudid at 14:56 for a total of 1 mg of Dilaudid. There is no record of wastage. Three (3) mg. of Dilaudid are unaccounted for.

b. Patient 2: On January 27, 2010, this patient's physician ordered multiple doses of 0.5 mg Dilaudid preoperatively to start at 16:47 and stop at 22:52. On January 27, 2010, at 16:58, Respondent withdrew from the Pyxis 2 mg of Dilaudid for this patient. At 18:17, Respondent withdrew another 2 mg of Dilaudid for this patient. Respondent charted in the MAR that she

¹ "Pyxis" is a trade name for the automatic single-unit dose medication dispensing system that records information such as patient name, physician orders, date and time medication was withdrawn, and the name of the licensed individual who withdrew and administered the medication. Each user/operator is given a user identification code to operate the control panel. Sometimes only portions of the withdrawn narcotics are given to the patient. The portions not given to the patient are referred to as "wastage." This waste must be witnessed by another authorized user and is also recorded by the Pyxis machine.

1 administered 0.5 mg of Dilaudid to the patient at 16:56, and that she administered 0.5 mg of
2 Dilaudid at 18:16 for a total of 1 mg of Dilaudid. There is no record of wastage. Three (3) mg. of
3 Dilaudid are unaccounted for.

4 c. Patient 3: On January 29, 2010, this patient's physician ordered multiple doses of 0.4
5 mg Dilaudid perioperatively to start at 18:49 and stop on January 30, 2010 at 00:18. On January
6 29, 2010, at 19:06, Respondent withdrew from the Pyxis 2 mg of Dilaudid for this patient. At
7 19:56, Respondent withdrew another 2 mg of Dilaudid for this patient. Respondent charted in the
8 MAR that she administered 0.4 mg of Dilaudid to the patient at 19:15, and that she administered
9 0.6 mg of Dilaudid at 19:55. In summary, Respondent withdrew 4 mg of Dilaudid, and charted
10 that she administered 1 mg of Dilaudid. There is no record of wastage, leaving three (3) mg. of
11 Dilaudid unaccounted for.

12 d. Patient 4: On February 24, 2010, this patient's physician ordered multiple doses of 0.5
13 mg Dilaudid every 5 minutes as needed from 16:15 to 19:20. On February 24, 2010, at 16:23,
14 Respondent withdrew from the Pyxis 2 mg of Dilaudid for this patient. At 16:48, Respondent
15 withdrew another 2 mg of Dilaudid for this patient. At 18:15, Respondent withdrew another 2 mg
16 of Dilaudid for this patient. At 19:23, Respondent withdrew another 2 mg of Dilaudid for this
17 patient. Respondent charted in the MAR that she administered 0.5 mg of Dilaudid to the patient
18 at 16:26, that she administered 1 mg of Dilaudid at 16:50, that she administered 0.5 mg Dilaudid
19 at 18:17, and that she administered 0.5 mg Dilaudid at 19:20. There is no record of wastage. In
20 summary, Respondent withdrew 8 mg of Dilaudid, and charted that she administered 2.5 mg of
21 Dilaudid, leaving five and one-half (5.5) mg. of Dilaudid unaccounted for.

22 e. Patient 5: On March 5, 2010, this patient's physician ordered multiple doses of 0.5 mg
23 Dilaudid preoperatively from 12:34 to 18:07. On March 5, 2010, at 12:58, Respondent withdrew
24 from the Pyxis 2 mg of Dilaudid for this patient. On March 5, 2010, at 14:18, Respondent
25 withdrew another 2 mg of Dilaudid for this patient. On March 5, 2010, Respondent charted in the
26 MAR that she administered 0.5 mg of Dilaudid to the patient at 12:57, that she administered 0.5
27 mg of Dilaudid at 14:16. In summary, Respondent withdrew 4 mg of Dilaudid, and charted that
28

1 she administered 1 mg of Dilaudid. There is no record of wastage, leaving three (3) mg. of
2 Dilaudid unaccounted for.

3 f. Patient 6: On March 10, 2010, this patient's physician ordered multiple doses of 0.2 mg
4 Dilaudid perioperatively from 16:44 to March 11, 2010 at 00:12. On March 10, 2010, at
5 16:55:09, Respondent withdrew from the Pyxis 2 mg of Dilaudid for this patient. On March 10,
6 2010 at 16:55:17, Respondent withdrew another 2 mg of Dilaudid for this patient, and on March
7 10, 2010 at 18:17, Respondent withdrew another 2 mg of Dilaudid for this patient. Respondent
8 charted in the MAR that she administered 0.2 mg of Dilaudid to the patient at 16:55, and that she
9 administered 0.2 mg of Dilaudid at 18:15. In summary, Respondent withdrew 6 mg of Dilaudid,
10 and charted that she administered a total of 0.4 mg of Dilaudid. Respondent recorded that she
11 wasted 3.6 mg of Dilaudid, leaving 2 mg of Dilaudid unaccounted for.

12 g. Patient 7: On March 25, 2010, this patient's physician ordered multiple doses of 0.2 mg
13 Dilaudid perioperatively from 16:09 to 21:24. On March 25, 2010, at 14:20, Respondent
14 withdrew from the Pyxis 2 mg of Dilaudid for this patient. Respondent charted in the MAR that
15 she administered 0.2 mg of Dilaudid to the patient at 14:20. There is no record of wastage,
16 leaving one and eight tenths (1.8) mg. of Dilaudid unaccounted for.

17 h. Patient 8: On February 12, 2010, this patient's physician ordered 0.5 mg Dilaudid every
18 4 hours as needed for moderate pain from February 12, 2010 at 20:09 to February 15, 2010 11:52.
19 On February 12, 2010, at 20:18, Respondent withdrew from the Pyxis 2 mg of Dilaudid for this
20 patient. On February 12, 2010 at 21:16, Respondent withdrew another 2 mg of Dilaudid for this
21 patient. Respondent charted in the MAR that she administered 0.5 mg of Dilaudid to the patient
22 at 20:20, and that she administered 0.4 mg of Dilaudid at 21:17. On February 12, 2010 at 21:22,
23 Respondent recorded that she wasted 1.6 mg of Dilaudid. In summary, Respondent withdrew 4
24 mg Dilaudid, charted that she administered 0.9 mg of Dilaudid, and wasted 1.6 mg of Dilaudid,
25 leaving one and one-half (1.5) mg. of Dilaudid unaccounted for.

26 i. Patient 9: On March 13, 2010, the physician ordered 0.4 mg Dilaudid every 5 minutes as
27 needed for a total of 2 mg from 16:17 to 22:52. On March 13, 2010, at 16:25, Respondent
28 withdrew from the Pyxis 2 mg of Dilaudid for this patient. On March 13, 2010 at 18:04,

Respondent withdrew another 2 mg of Dilaudid for this patient. Respondent charted in the MAR that she administered 0.4 mg of Dilaudid to the patient at 17:02, and that she administered 0.4 mg of Dilaudid at 18:07. On March 13, 2010 at 16:35, Respondent recorded that she wasted 1.6 mg Dilaudid. In summary, Respondent removed 4 mg Dilaudid, reported that she administered 0.8 mg Dilaudid, and wasted 1.6 mg Dilaudid, leaving one and six tenths (1.6) mg. of Dilaudid unaccounted for.

j. Patient 10: On March 25, 2010, this patient's physician ordered doses of 0.5 mg Dilaudid every 3 minutes as needed for moderate pain for a maximum of 4 doses perioperatively from 22:08 to March 26, 2010 at 00:56. On March 25, 2010, the physician also ordered 0.5 mg Dilaudid every 2 minutes as needed for pain for a total of 2 mg from 16:27 to March 26, 2010 at 00:56. On March 25, 2010, at 16:40, Respondent withdrew from the Pyxis 2 mg of Dilaudid for this patient. On March 25, 2010 at 17:48, Respondent withdrew another 2 mg of Dilaudid for this patient. Respondent charted in the MAR that she administered 0.5 mg of Dilaudid to the patient at 16:40, and that she administered 0.5 mg of Dilaudid at 17:49. On March 25, 2010 at 18:19, Respondent recorded that she wasted 1.5 mg Dilaudid. In summary, Respondent removed 4 mg Dilaudid, reported that she administered 1 mg Dilaudid, and wasted 1.5 mg Dilaudid, leaving one and one-half (1.5) mg. of Dilaudid unaccounted for.

FIRST CAUSE FOR DISCIPLINE

(False Entries in Hospital/Patient Records)

18. Respondent is subject to disciplinary action under section 2761(a), on the grounds of unprofessional conduct, as defined in Code section 2762(e), in that between on or about January 25, 2010 to May 14, 2010, while on duty as a registered nurse at Kaiser Hospital, San Diego, California, Respondent falsified, or made grossly incorrect, grossly inconsistent, or unintelligible entries in hospital, patient, or other records pertaining to the controlled substance Dilaudid, as is detailed in paragraphs 14 through 17, above, which are incorporated herein by reference.

///

///

///

SECOND CAUSE FOR DISCIPLINE

(Obtain, Possess and Administered Controlled Substances)

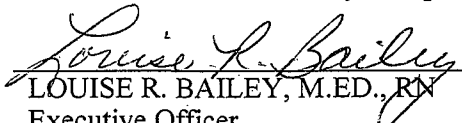
19. Respondent is subject to disciplinary action pursuant to Code section 2761(a), on the grounds of unprofessional conduct, as defined by Code section 2762(a), and in violation of Health and Safety Code sections 11170 and 11173, subdivision (a), in that between on or about January 25, 2010 and May 14, 2010, while on duty as a registered nurse at Kaiser Hospital, Respondent obtained, possessed, and/or administered to herself the controlled substance Dilaudid, as set forth in paragraphs 14 through 17, above, which are incorporated herein by reference.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Registered Nursing issue a decision:

1. Revoking or suspending Registered Nurse License Number 613677 issued to Carol Ann Farnstrom, aka Carol Ann Franstron, aka Carol Ann Farstrom, aka Carol Ann Pageau;
2. Ordering Carol Ann Farnstrom to pay the Board of Registered Nursing the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3; and
3. Taking such other and further action as deemed necessary and proper.

DATED: December 15, 2011


LOUISE R. BAILEY, M.ED., RN
Executive Officer
Board of Registered Nursing
Department of Consumer Affairs
State of California
Complainant

SD2011801293
accusation.rtf